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Bib Data Sheet									_
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APPLICANTS									
Robert M.	Judd,	Wheeling, IL;							
		Chicago, IL; n, Chicago, IL;							
** CONTINUING	DATA	4 <i>J.</i> V	r *						
** FOREIGN API	PLICA	ATIONS ************	***						
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Foreign Priority claimed				STATE OR	SHE	SHEETS TO		AL	INDEPENDENT
Allowance '						DRAWING CLAI		MS (<i>4</i>	CLAIMS
ADDRESS 25541 NEAL, GERBER SUITE 2200 2 NORTH LASAI CHICAGO, IL 60602									
TITLE Medical image m	nanage	ement system							
	140101 10110Willig.					All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue)			